

UNITED STATES SECURITIES AND EXCHANGE COMMISS:
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMP

OMB.	APPI	ROV	AL
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OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response. . . 16.00

	SEC U	SE ONL	Y
Prefix			Serial
	<u> </u>		
	DATE	RECEIVE	D
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UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate ch Beecher Carlson Holdings, Inc. – Private Placement of Common Stock	ange.)
Filing Under (Check box(es) that apply:) □ Rule 504 □ Rule 505 ☒ Rule 50 Type of Filing: ☒ New Filing □ Amendment	06 Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	(%)
Enter the information requested about the issuer	Z Z B - 0 300 E
Name of Issuer (check if this is an amendment and name has changed, and indicate changed).	(e.)
Beecher Carlson Holdings, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Executive Offices (Ivalided and Street, City, State, Zip Code)	
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319	(404) 460-1400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	P. PROCESSE
Insurance brokerage	P. HOOE39E
Type of Business Organization	FEB 2 2 2007
☐ corporation ☐ limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	THUMSON
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	-1.
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regula or 15 U.S.C. 77d(6).	ation D or Section 4(6), 17 CFR 230.501 et seq.
When to File: A notice must be filed no later than 15 days after the first sale of securities in the of Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at address after the date on which it is due, on the date it was mailed by United States registered or certif	the address given below or, if received at that
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be ma must be photocopies of the manually signed copy or bear typed or printed signatures.	nually signed. Any copies not manually signed
Information Required: A new filing must contain all information requested. Amendments need only	report the name of the issuer and offering, any

Filing Fee: There is no federal filing fee.

and the Appendix need not be filed with the SEC.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part É

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or (Manager) Managing Partner
Full Name (Last name first, if individual)
Golub, Thomas A.
Business or Residence Address (Number and Street, City, State, Zip Code)
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or (Manager) Managing Partner
Full Name (Last name first, if individual)
Cappel, Jeffery B.
Business or Residence Address (Number and Street, City, State, Zip Code)
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Meyerowitz, Adam S.
Business or Residence Address (Number and Street, City, State, Zip Code)
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319
,
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Jassmann, John
Business or Residence Address (Number and Street, City, State, Zip Code)
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319
2002 Summing State (22), Totalital, Girl 3031)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Austin Ventures VII, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
300 West 6th Street, Suite 2300, Austin, TX 78701

Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	.
Full Name (Last name first, if individual)	
Austin Ventures VIII, L.P.	`.
Business or Residence Address (Number and Street, City, State, Zip Code)	
300 West 6th Street, Suite 2300, Austin, TX 78701	1]
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner	
Full Name (Last name first, if individual)	
Wesner, Blaine	1
Business or Residence Address (Number and Street, City, State, Zip Code)	
300 West 6 th Street, Suite 2300, Austin, TX 78701	ıl
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner	
Full Name (Last name first, if individual)	· ;
Lalande, Kevin	
Business or Residence Address (Number and Street, City, State, Zip Code)	51 - 11
300 West 6 th Street, Suite 2300, Austin, TX 78701	1
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner	j 1
Full Name (Last name first, if individual)	,
Gamsey, David L.	:
Business or Residence Address (Number and Street, City, State, Zip Code)	- · ·
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319	4
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner	!
Full Name (Last name first, if individual)	
Scheinfeld, Ryan	:
Business or Residence Address (Number and Street, City, State, Zip Code)	1.
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319	· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner	1.
Full Name (Last name first, if individual)	-
Gagnon, Christopher	
Business or Residence Address (Number and Street, City, State, Zip Code)	:
2002 Summit Boulevard, Suite 925, Atlanta, GA 30319	

Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or	
				Managing Partner	
Full Name (Last name first, if individual)					
Tofil, J. Scott					
					ij.
Business or Residence Address (Number and	d Street, City, State, Z	ip Code)			ŗ
2002 Summit Boulevard, Suite 925, Atlanta,	GA 30319				
2002 Samme Doutevala, Same 525, Italia,	37130317				3
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or	
Circuit Deni(ce) man rippi).		E Executive officer		Managing Partner	1
Full Name (Last name first, if individual)					
Dresch, Lesłey					
•					
Business or Residence Address (Number and	d Street, City, State, Z	ip Code)			-
2002 Summit Boulevard, Suite 925, Atlanta,	GA 30319				
, 					i,
					_
(Use blank sheet,	, or copy and use addit	tional copies of this she	et, as necessar	y)	4

-		4.4	73 2 73		B. II	NEORMA	TION AE	BOUT OF	FERING		7 .	•		
1.	Has the	e issuer so	ld, or does			sell, to nor							Yes □	No 区
2.	What i	s the mini	num inves	stment that	will be ac	cepted fro	m any ind	ividual?	***************************************		•••••••		\$ <u>N/A</u>	<u>A</u>
3.	Does t	he offering	g permit jo	oint owners	hip of a si	ingle unit?							Yes □	No 🔀
4.	similar an asso or dea inform	remunera ociated per ler. If mo ation for the	tion for so son or age ore than fi hat broker	olicitation of a broive (5) per or dealer	of purchas oker or des sons to b	ers in con aler registe	nection wi	th sales of he SEC an	securities d/or with a	in the offer state or s	ering. If a tates, list t	y, any com person to he name of ou may se	be listed the brok	l is ker 🖟
Ful	Name	(Last name	e first, if i	ndividual)										
N/A				01 1	1.0	G ' G		• `						<u> </u>
Bus	iness oi	Residenc	e Address	(Number	and Street	, City, Stat	e, Zip Coo	ie)						i
Naı	ne of A	ssociated I	Broker or	Dealer										
Sta	tes in W	hich Perso	n Listed I	Has Solicit	ed or Inter	nds to Soli	cit Purcha	sers						
	(Check	"All States	s" or chec	k individua	l States)		•••••		*************	**********		🗆 Al	l States	-
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Ful	l Name	(Last name	e first, if i	ndividual)										- 1
N/A	1		_].
Bus	siness or	Residenc	e Address	(Number a	and Street	, City, Stat	e, Zip Coo	le)		•	· · · · · · · · · · · · · · · · · · ·			
Nar	ne of A	ssociated I	Broker or	Dealer										Ħ
Sta	tes in W	hich Perso	n Listed I	las Solicit	ed or Inter	nds to Soli	cit Purcha	sers		···				
	(Check	"All States	s" or checl	k individua	ıl States)			*************		•••••		🗆 Al	l States	4) 3
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Ful	l Name	(Last name	e first, if i	ndividual)										
N/A														
Bus	siness or	Residenc	e Address	(Number a	and Street	, City, Stat	e, Zip Coo	le)	•					· .
Nar	ne of A	ssociated I	Broker or	Dealer										1
Sta	tes in W	hich Perso	n Listed I	las Solicit	ed or Inter	nds to Soli	cit Purcha	sers	···					
					•								l States	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W1]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	i i

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. Offering Price, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	. * il
1.	Enter the aggregate offering price of securities included in this offering and the total amount alr Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this be indicated in the columns below the amount of securities offered for exchange and already exchange	oox 🛘 and	
	mulcate in the columns below the amount of securities offered for exchange and already exchange	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$2,213,198.50*	\$ <u>2,213,198.50</u>
	☐ Common ☒ Preferred		'
	Convertible Securities (including warrants)		\$
	Partnership Interests		\$
	Other (Specify:)	\$	\$
	Total	\$ 2,213,198.50*	\$ <u>2,213,198.50</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE. *The investors are acquiring the shares of common stock of the issuer in connection with the sale of a business. The issue additional shares to the investors in the future if certain financial objectives are met. Enter the number of accredited and non-accredited investors who have purchased securiti offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, in number of persons who have purchased securities and the aggregate dollar amount of their purchased.	es in this dicate the	*
	the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	3	\$ <u>2,213,198.50</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		•
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior t sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	<u></u>	\$
	Total	•••	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the se this offering. Exclude amounts relating solely to organization expenses of the issuer. The in may be given as subject to future contingencies. If the amount of an expenditure is not known, estimate and check the box to the left of the estimate.	formation	3
	Transfer Agent's Fees	🗆 \$	S
	Printing and Engraving Costs	🗆 \$.
	Legal Fees		100,000.00
	Accounting Fees		
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		· · · · · · · · · · · · · · · · · · ·
			1-
	Other Expenses (identify)		100,000,00
	Total	🗵 🤋	100,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	,	
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the the "adjusted gross proceeds to the issuer."		\$ <u>2</u>	
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.			1
		Payments to Officers, Directors, & Affiliates	P	Payments to Others
	Salaries and fees	\$	□ \$	<u> </u>
	Purchase of real estate	\$		il
	Purchase, rental or leasing and installation of machinery and equipment	\$	□ \$_	:
	Construction or leasing of plant buildings and facilities	\$	□ \$	<u> </u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger	\$	☑ \$ 2	.,113,198. <u>5</u> 0
	Repayment of indebtedness			
	Working capital		□ \$_	· · · · · · · · · · · · · · · · · · ·
	Other (specify):			<u> </u>
			l⊡l tra	1 112 100 50
	Column Totals			2,113,198.50

following signature constitutes an underta	e signed by the undersigned duly authorized person. If king by the issuer to furnish to the U.S. Securities and d by the issuer to any non-accredited investor pursuant	d Exchange Commission, upon writte
Issuer (Print or Type)	Signature 1 11	Date
Beecher Carlson Holdings, Inc.	1 Min MARI	2/7/2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	-
Adam S. Meyerowitz	Senior Vice President and Secretary	

		E. STATE SIGNATURE							
1.	. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?								
	See Append	lix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	e issuer has read this notification and knows the codersigned duly authorized person.	ontents to be true and has duly caused this	notice to be signed on its	behalf l	by the				
Iss	uer (Print or Type)	Signature	Date						
Be	echer Carlson Holdings, Inc.	1 / Jun 1, VVII XV	2/7/2007						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							

Senior Vice President and Secretary

Instruction:

Adam S. Meyerowitz

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		ŭ i			APPENDIX :				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of ir amount purc	avestor and hased in State -Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL			<u>, , , , , , , , , , , , , , , , , , , </u>				·		•
AK									(i . ii
AZ									<u> </u>
AR		ı) ·
CA									
со									
СТ									
DE									
DC									
FL		Х	Common Stock \$2,213,198.50	3	\$2,213,198.50	0	0		X
GA									Ţ.
ні									i,
ID									1 d
IL									- 35
IN									
IA		2							
KS									1F.
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LA									1100
ME									1917 1137 1
MD									<i>5</i> (
МА									
MI									1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MN									
MS									¥ 1

APPENDIX

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1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО	143			Investors	7111104111	1111031013	1 timount		1.0
MT		· - ·- · · · ·						<u>. </u>	j.
NE									
NV									i i
NH									1
NJ			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
NM						,			1
NY									
NC								i	2
ND									.1
ОН									Ä
ОК									1
OR									Ψ 1•
PA									1
RI									jr 1 4
SC						-			1.
SD									-1.
TN									1
TX									4
UT								_	1
VT									1:
VA									 !
WA									i)
wv					,				-
WI									#- -

		<u> </u>		7,3 · AF	PENDIX.	<u> </u>		1 . T. F	· .
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State WY	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR				1					

 \mathcal{END}